PART B - FEE(S) TRANSMITTAL

Complete and send this fount together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

Tammy L. Moulton

or Fax

(703) 746-4000

INSTRUCTION This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All fit there are a bodience including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

7590

08/03/2004

Kevin M. Farrell Pierce Atwood Suite 350 One New Hampshire Avenue

Portsmouth, NH 03801

10/15/2004 GWORDOF2 00000067 500282 10655941

01 FC:1504

300.00 OP

ICATION NO

FILING

FIRST NAMED INVENTOR

ATTORNEY DOCKET NO.

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying

papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

CONFIRMATION NO.

10/655,941

09/05/2003

Michael Lebner

0156-2003US02

7019

(Depositor's name)

(Signature)

(Date)

TITLE OF INVENTION: BANDAGE FOR WOUND OR INCISION CLOSURE

APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE	PUBLICATION FEE	TOTAL F	EE(S) DUE	DATE DUE	
nonprovisional	YES	\$665		\$300	\$	965	11/03/2004	
EXAM	MINER	ART UN	IT	CLASS-SUBCLASS]			
LEWIS, KIM M		3743		602-054000				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).				nting on the patent front page, I		torneys 1 Pierce Atwood		
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			or agents	OR, alternatively,	_	Kewin M Farrell		
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a m registered attorney or agent) and the names 2 registered patent attorneys or agents. If no listed, no name will be printed.		nes of up to f no name is	3		

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

ClozeX Medical

Wellesley, Massachusetts

Olozek Hedreal, Ello	wellestey,	nassaenae	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Please check the appropriate assignee category or categories (will not	be printed on the patent);	☐ individual	corporation or other private group entity	☐ government			
4a. The following fee(s) are enclosed:	4b. Payment of Fee(s):						
X Issue Fee	A check in the amount of the fee(s) is enclosed.						
Deputies Publication Fee (No small entity discount permitted)	Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).						
X Advance Order - # of Copies							
5. Change in Entity Status (from status indicated above)							
🗴 a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.	□ b. Applicant is not claiming SMALL ENTITY status. See, e.g., 37 CFR 1.27(g)(2).						
The Director of the USPTO is requested to apply the Issue Fee and Pu	blication Fee (if any) or to	re-apply any prev	viously paid issue fee to the application identif	fied above.			

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

(Authorized Signature)

(Date)

40/51/01

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMIT THIS FORM WITH FEE(S)